



State of Montana DEPARTMENT OF CORRECTIONS EMERGENCY NOTIFICATION CONTACT LIST

Please complete all applicable information fields below and submit the completed form to dvaught@mt.gov or momholt-mason@mt.gov, this information should be updated and submitted quarterly.

Date Updated:					
General Facility Information					
Facility					
Address				City / Zip	
Primary Phone#					

Primary Leadership Emergency Contact Information <i>List in The Order To Be Contacted</i> (Personal Cell # Optional)					
#1 Name				Position	
Work#		Work Cell#		Personal Cell#	
Home#		Other#		Email	

#2 Name				Position	
Work#		Work Cell#		Personal Cell#	
Home #		Other#		Email	

#3 Name				Position	
Work#		Work Cell#		Personal Cell#	
Home #		Other#		Email	

#4 Name				Position	
Work#		Work Cell#		Personal Cell#	
Home #		Other#		Email	

EOC / Command Post Numbers, If Applicable (Facility Type: EOC, Secondary EOC, Command Post, Other)					
Facility Type		Primary Phone#		Secondary Phone #	
Facility Type		Primary Phone#		Secondary Phone #	
Facility Type		Primary Phone#		Secondary Phone #	
Fax # 1		Fax # 2		Fax # 3	

Emergency Preparedness Staff Information						
#1 Name				Position		
Work#		Work Cell#			Personal Cell#	
Home#		Other#			Email	

#2 Name				Position		
Work#		Work Cell#			Personal Cell#	
Home#		Other#			Email	

Other Emergency Contact Information						
#1 Name				Position		
Work#		Work Cell#			Personal Cell#	
Home#		Other#			Email	

#2 Name				Position		
Work#		Work Cell#			Personal Cell#	
Home#		Other#			Email	

#3 Name				Position		
Work#		Work #			Personal Cell#	
Home#		Other#			Email	

List All Other Important Contact / Relevant Information Below